Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Samuel First name Alexander Middle name Bowyer Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years Include your married or	3		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3658		

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	22895 Saint George Circle	If Debtor 2 lives at a different address:
		South Lyon, MI 48178 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Oakland	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Samuel Alexander	r Bowyer				Case number	er (if known)
Par	t 2: Tell the Court About	Your Bankru	ıptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under	(Form 2010	0)). Also, go to	description of each, see the top of page 1 and			342(b) for Individuals Filing for Bankruptcy
	•	Chapte	r 7				
		☐ Chapte	r 11				
		☐ Chapte	r 12				
		☐ Chapte	r 13				
8.	How you will pay the fee	abou ordei	t how you ma	ay pay. Typically, if you a ney is submitting your p	are paying the	fee yourself, you n	erk's office in your local court for more details may pay with cash, cashier's check, or money rney may pay with a credit card or check with
						s option, sign and	attach the Application for Individuals to Pay
			Ū	Installments (Official For	,	ontion only if you	are filing for Chapter 7. By law, a judge may,
		but is appli	s not required es to your far	I to, waive your fee, and mily size and you are un	may do so only able to pay the	y if your income is fee in installment	less than 150% of the official poverty line that s). If you choose this option, you must fill out BB) and file it with your petition.
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
			District		When		Case number
			District		When		Case number
			District		When		Case number
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor				Relationship to you
			District		When		Case number, if known
			Debtor				Relationship to you
			District		When		Case number, if known
11.	Do you rent your	■ No.	Go to line 1	2.			
	residence?	☐ Yes.	Has your la	ndlord obtained an evict	ion judgment a	gainst you?	
			□ No.	Go to line 12.			
			_	. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About an Evi	ction Judgment Ag	gainst You (Form 101A) and file it as part of

Jer	Samuel Alexander	Bowyer	*		Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Owr	ı as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
	buomeoo.	☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a	— 100.			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as o	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the abov	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir	ndicate that you are ow statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
•ar	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
					Number, Street, City, State & Zip Code

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Samuel Alexande	r Bowye	r	Cas	e number (if known)	
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts	are defined in 11 U.S.C. § 101(8) as "inco."	urred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		business debts? Business debts a vestment or through the operation o		
			☐ No. Go to line 16c.	- '		
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consumer debts o	business debts	
						_
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		. Do you estimate that after any exe available to distribute to unsecured or	mpt property is excluded and administrative reditors?	/e expenses
	administrative expenses		■ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	2 5,001-50,000	
	you estimate that you owe?	☐ 50-99)	☐ 5001-10,000	5 0,001-100,000	
	OWE:	□ 100-1		□ 10,001-25,000	☐ More than100,000	
		200-9	999			
19.	How much do you	s 0 - \$	550,000	□ \$1,000,001 - \$10 million		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 milli □ \$50,000,001 - \$100 mill		
			,001 - \$500,000 ,001 - \$1 million	□ \$100,000,001 - \$100 mm		IIIOII
20	How much do you	_		П ф4 000 004 . ф40 . III	П фтоо ооо оод филин	
20.	estimate your liabilities	■ \$0 - \$	650,000 001 - \$100,000	□ \$1,000,001 - \$10 millior □ \$10,000,001 - \$50 milli		
	to be?		,001 - \$100,000	□ \$50,000,001 - \$100 mill		
			001 - \$1 million	□ \$100,000,001 - \$500 m	Ilion ☐ More than \$50 billion	
Par	t 7: Sign Below					
For	you	I have ex	kamined this petition, and I de	eclare under penalty of perjury that	he information provided is true and correc	 xt.
					eligible, under Chapter 7, 11,12, or 13 of and I choose to proceed under Chapter 7	
				d not pay or agree to pay someone with the notice required by 11 U.S.C. § 3	who is not an attorney to help me fill out thi 42(b).	is
		I request	relief in accordance with the	e chapter of title 11, United States C	ode, specified in this petition.	
		bankrupt and 357	tcy case can result in fines սլ 1.		money or property by fraud in connection p to 20 years, or both. 18 U.S.C. §§ 152,	
		Samue	uel Alexander Bowyer I Alexander Bowyer e of Debtor 1	Signature	of Debtor 2	
		Executed	d on July 19, 2019	Executed	on	
			MM / DD / YYYY		MM / DD / YYYY	

Debtor 1	Samuel Alexander Bowyer	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Hugh Robert Pierce Signature of Attorney for Debtor	Date	July 19, 2019 MM / DD / YYYY
Hugh Robert Pierce P30488		
Hugh Robert Pierce, P.C.		
25600 Woodward Ave., Ste. 216 Royal Oak, MI 48067		
Number, Street, City, State & ZIP Code Contact phone 248-398-5000	Email address	attorneypierce@sbcglobal.net
P30488 MI Bar number & State	-	

Fill	n this information to identify your case:		
Deb			
Deb	First Name Middle Name Last Name Or 2		
	se if, filing) First Name Middle Name Last Name		
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN		
Cas (if kn	e numberwn)	_	if this is an ed filing
Su	icial Form 106Sum nmary of Your Assets and Liabilities and Certain Statistical Information		2/15
infor	s complete and accurate as possible. If two married people are filing together, both are equally responsible nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amer original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. 1: Summarize Your Assets		
		Your as	sets
			what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,815.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	6,815.00
Part	2: Summarize Your Liabilities		
		Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$	7,276.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,425.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	38,528.00
	Your total liabilitie	s \$	47,229.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,525.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,719.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your part of the form.	our other sch	edules.
7.	■ Yes What kind of debt do you have?		
	■ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	or a personal,	family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum page 1 of 2

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,870.66

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	1,425.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	14,293.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	15,718.00

btor 1	Samuel Alexan	der Bowyer				
	First Name	Middle	e Name Last Name			
btor 2 ouse, if filing)	First Name	Middle	Name Last Name			
ited States	Bankruptcy Court for the	: EASTERN	DISTRICT OF MICHIGAN			
se number						Check if this is a amended filing
fficial F	Form 106A/B					aoaoag
	ule A/B: Pro	pertv				12/15
o you own	ibe Each Residence, Buildi or have any legal or equita	<u> </u>	her Real Estate You Own or Have an Interest In iny residence, building, land, or similar property?			
_	Go to Part 2.					
	Where is the property?					
Street addre	pes if available or other descripti	00	What is the property? Check all that apply ☐ Single-family home	the amount of a	any secured o	ns or exemptions. Put claims on Schedule D:
	ess, if available, or other descripti	on	☐ Single-family home ☐ Duplex or multi-unit building	the amount of a	any secured on Have Claims of the	
	ess, if available, or other descripti State	on ZIP Code	☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative	the amount of a Creditors Who I	any secured on Have Claims of the y?	claims on Schedule D: Secured by Property. Current value of the
Street addre	·		☐ Single-family home ☐ Duplex or multi-unit building	the amount of a Creditors Who courrent value of entire property	any secured on Have Claims of the y?	claims on Schedule D: Secured by Property. Current value of the portion you own?
Street addre	·		☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home	the amount of a Creditors Who courrent value of entire property	any secured on Have Claims of the y?	claims on Schedule D: Secured by Property. Current value of the portion you own?
Street addre	·		☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	the amount of a Creditors Who courrent value of entire property	any secured on Have Claims of the y?	claims on Schedule D: Secured by Property. Current value of the portion you own?
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	the amount of a Creditors Who i Current value e entire property \$	any secured c Have Claims of the y?	claims on Schedule D: Secured by Property. Current value of the portion you own?
Street addre	·		☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare	the amount of a Creditors Who I Current value entire property \$ Describe the n	any secured of Have Claims of the 1/2	claims on Schedule D: Secured by Property. Current value of the portion you own? \$
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check	the amount of a Creditors Who I Current value e entire property \$ Describe the n (such as fee si	any secured of Have Claims of the 1/2	claims on Schedule D: Secured by Property. Current value of the portion you own? \$ ur ownership interest
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only	the amount of a Creditors Who I Current value e entire property \$ Describe the n (such as fee si	any secured of Have Claims of the 1/2	claims on Schedule D: Secured by Property. Current value of the portion you own? \$ ur ownership interest
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of a Creditors Who Current value entire property Describe the n (such as fee si a life estate), if	any secured of Have Claims of the (??	claims on Schedule D: Secured by Property. Current value of the portion you own? \$ ur ownership interest
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of a Creditors Who I Current value entire property \$ Describe the n (such as fee si a life estate), if	any secured of Have Claims of the (??	claims on Schedule D: Secured by Property. Current value of the portion you own? \$
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of a Creditors Who I Current value entire property \$ Describe the n (such as fee si a life estate), if	any secured of Have Claims of the (??	claims on Schedule D: Secured by Property. Current value of the portion you own? \$
Street addre	·		□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this if	the amount of a Creditors Who I Current value entire property \$ Describe the n (such as fee si a life estate), if	any secured of Have Claims of the (??	claims on Schedule It Secured by Property Current value of the portion you own? ### The company of the company

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Samuel Alexander Bowy	yer	ase number (if known)	
3. Cars, var	ns, trucks, tractors, sport ut	ility vehicles, motorcycles		
□ No				
■ Yes				
- 165				
3.1 Make:	Dodge	Who has an interest in the property? Check one		claims or exemptions. Put
Mode	1	■ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
Year:	2010	Debtor 2 only	Current value of the	Current value of the
Appro	oximate mileage:	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other	information:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$4,500.00	\$4,500.00
		TVs and other recreational vehicles, other vehicles, and other recreational watercraft, fishing vessels, snowmobiles, motorcycle		
		ou own for all of your entries from Part 2, including a Write that number here		\$4,500.00
Part 3: Des	cribe Your Personal and House	ehold Items		
		able interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Example □ No	Id goods and furnishings s: Major appliances, furniture,	linens, china, kitchenware		
	Househole	d goods and furnishings		\$1,500.00
□ No	s: Televisions and radios; aud	dio, video, stereo, and digital equipment; computers, printe eras, media players, games	ers, scanners; music collec	tions; electronic devices
	Television	, cell phone and misc. electronics		\$500.00
■ No		ntings, prints, or other artwork; books, pictures, or other ar iilia, collectibles	rt objects; stamp, coin, or b	aseball card collections;
Example No	nt for sports and hobbies s: Sports, photographic, exerc musical instruments	cise, and other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and k	ayaks; carpentry tools;
10. Firearm Exampl ■ No		mmunition, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

De	ebtor 1	Samuel Alex	ander B	owyer	Case number	r (if known)
	☐ Yes.	Describe				
11.	□No		othes, furs	, leather coats, designe	er wear, shoes, accessories	
			Clothir	ng		\$200.00
12.	■ No		welry, cos	tume jewelry, engagem	ent rings, wedding rings, heirloom jewelry, watche	es, gems, gold, silver
13.	Examp ■ No	rm animals bles: Dogs, cats, Describe	birds, hors	ses		
14.	■ No	her personal an		-	already list, including any health aids you did	not list
15					3, including any entries for pages you have att	ached \$2,200.00
Pa	rt 4: Des	scribe Your Finan	cial Assets			
Do	o you ow	n or have any l	egal or ed	uitable interest in any	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		-	ur wallet, in your home	in a safe deposit box, and on hand when you file	your petition
17.	Examp	ts of money bles: Checking, sinstitutions.	avings, or If you hav	other financial account e multiple accounts wit	s; certificates of deposit; shares in credit unions, b n the same institution, list each.	prokerage houses, and other similar
	□ No ■ Yes				Institution name:	
			17.1.	Checking (9022)	Chase Bank (account held jointly with R. Bowyer)	Mark \$10.00
			17.2.	Checking (1967)	Chase (account held jointly with Mark Bowyer)	R. \$5.00
18.	,	•	•	y traded stocks nt accounts with broker	age firms, money market accounts	
	☐ Yes			nstitution or issuer nam	e:	
19.	Non-pu joint v		ock and i	nterests in incorporat	ed and unincorporated businesses, including	an interest in an LLC, partnership, and
	_	Give specific inf		about them	% of owners	ship:

Official Form 106A/B Schedule A/B: Property page 3

D	Samuel Alexander Bowye	r	ase number (if known)	
20.	Negotiable instruments include persona	d other negotiable and non-negotiable instruments il checks, cashiers' checks, promissory notes, and mon ou cannot transfer to someone by signing or delivering		
	Yes. Give specific information about the Issuer name			
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Ked ■ No	ogh, 401(k), 403(b), thrift savings accounts, or other per	nsion or profit-sharing plan	is
	☐ Yes. List each account separately. Type of accounts	unt: Institution name:		
22.		have made so that you may continue service or use from prepaid rent, public utilities (electric, gas, water), teleco		or others
	☐ Yes	Institution name or individual:		
23.	_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	ment of money to you, either for life or for a number of	/ears)	
	■ No □ Yes Issuer name and o	description.		
24.	Interests in an education IRA, in an ac 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 ■ No	count in a qualified ABLE program, or under a qual 9(b)(1).	ified state tuition progra	m.
		nd description. Separately file the records of any interes	sts.11 U.S.C. § 521(c):	
	■ No	n property (other than anything listed in line 1), and	rights or powers exercis	able for your benefit
	☐ Yes. Give specific information about t	hem		
26.		e secrets, and other intellectual property sites, proceeds from royalties and licensing agreement	s	
	\square Yes. Give specific information about t	hem		
	■ No	censes, cooperative association holdings, liquor licens	es, professional licenses	
	☐ Yes. Give specific information about t	hem		
M	oney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you ☐ No			
	■ Yes. Give specific information about the	nem, including whether you already filed the returns and	d the tax years	
		D. Lee	I	
		Right to receive possible income tax refund (amount is an estimate and is pro-rated for 2019)	Federal, State	\$100.00
29.	Family support			
	Examples: Past due or lump sum alimon No	ny, spousal support, child support, maintenance, divorc	e settlement, property sett	tlement
	☐ Yes. Give specific information			

Official Form 106A/B Schedule A/B: Property page 4

De	ebtor 1	Samuel Alex	ander Bowyer	Case number (if known)	
30.			•	benefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No				
	☐ Yes.	Give specific info	ormation		
31.		sts in insurance poles: Health, disab		int (HSA); credit, homeowner's, or renter's insural	nce
	■ No				
	☐ Yes.	Name the insurar	nce company of each policy and list its value		
			Company name:	Beneficiary:	Surrender or refund value:
32.	If you		y that is due you from someone who has y of a living trust, expect proceeds from a lif	e insurance policy, or are currently entitled to rec	eive property because
	■ No	nie nas died.			
	_	Give specific info	ormation		
		Give opcome init	indion.		
33.			arties, whether or not you have filed a law mployment disputes, insurance claims, or rig		
	_	Describe each cl	aim		
34.	_	contingent and u	ınliquidated claims of every nature, inclu	ding counterclaims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each cl	aim		
35.	Anv fir	nancial assets vo	ou did not already list		
	■ No	,	,		
	☐ Yes.	Give specific info	ormation		
36			of all of your entries from Part 4, includin number here	g any entries for pages you have attached	\$115.00
Pa	rt 5: De	scribe Any Busine	ss-Related Property You Own or Have an Inter	est In. List any real estate in Part 1.	
	-	-	gal or equitable interest in any business-relate	ed property?	
ı	No. Go	to Part 6.			
[☐ Yes. 0	Go to line 38.			
					Current value of the
					portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable o	commissions you already earned		
	□ No				
	_	Describe			
		2000112011111			
39.	Office Examp	equipment, furni oles: Business-rel	 i shings, and supplies ated computers, software, modems, printers	s, copiers, fax machines, rugs, telephones, desks	, chairs, electronic devices
	□ No				
	☐ Yes.	Describe			
40.	Machir	nery, fixtures, eq	uipment, supplies you use in business, a	and tools of your trade	
	□ No				
	☐ Yes.	Describe			
Off	icial Forr	m 106A/B	Schedule A/	B: Property	page 5

Debtor 1	Samuel Alex	ander Bowyer	Case number (if known)	
41. Invent	tory			
□ No				
☐ Yes.	Describe			
42. Interes	sts in partnership	ps or joint ventures		
□ No				
	Give specific info	ormation about them		
		Name of entity:	% of ownership:	
			%	
	mer lists, mailing	g lists, or other compilations		
□ No.	ur liete includo nor	rsonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
<u> </u>	ui iisis iiiciuue pei	Solially Identifiable information (as defined in 11 0.5.0. § 101(41A))?		
	☐ No ☐ Yes. Describe			
ı	☐ Yes. Describe	3		
44. Any b ւ	usiness-related p	property you did not already list		
□ No				
☐ Yes.	Give specific info	ormation		
		of all of your entries from Part 5, including any entries for page		
for Pa	art 5. Write that i	number here		
		and Commercial Fishing-Related Property You Own or Have an Interest interest in farmland, list it in Part 1.	In.	
46. Do voi	u own or hove or	ny legal or equitable interest in any farm- or commercial fishing	related property?	
_	Go to Part 7.	iy legal or equitable interest in any farin- or commercial fishing	g-related property:	
☐ Yes	s. Go to line 47.			
				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
47. Farm a	animale			
		oultry, farm-raised fish		
□ No				
☐ Yes				
48. Crops -	either growing	or harvested		
		•		
□ No □ Yes.	Give specific info	ormation		
	,			

Official Form 106A/B

Schedule A/B: Property

Deb	tor 1 Samuel Alex	xander Bowyer		Case number (if known)	
49. I	Farm and fishing equi	pment, implements, machinery, fixtures,	and tools of trade		
] No] Yes				
50. I	Farm and fishing sup	olies, chemicals, and feed			
] No] Yes				
51.	Any farm- and comme	rcial fishing-related property you did no	t already list		
52. Part 53. I	7: Describe All Pr Do you have other pro Examples: Season tick No 1 Yes. Give specific inf Add the dollar value	of all of your entries from Part 6, includinumber here	ou Did Not List Above	es you have attached	\$0.00
Part		f Each Part of this Form ate, line 2			***
	Part 1: Total real est				\$0.00
		al and household items, line 15	\$4,500.00 \$2,200.00		
58.	Part 4: Total financia	,	\$115.00		
59.		ss-related property, line 45	\$0.00		
60.		nd fishing-related property, line 52	\$0.00		
61.		roperty not listed, line 54	+ \$0.00		
62.	Total personal prope	erty. Add lines 56 through 61	\$6,815.00	Copy personal property tota	\$6,815.00
63.	Total of all property	on Schedule A/B. Add line 55 + line 62		-	\$6,815.00

Debtor 1	Samuel Alexande	er Bowyer		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	DF MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing
	orm 106C			_
Schadul	IA (`· I hA Dr	anarty Vali (Claim as Exempt	4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	? Check one only, ever	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbar	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/E	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2010 Dodge Journey Line from Schedule A/B: 3.1	\$4,500.00		\$4,000.00	11 U.S.C. § 522(d)(2)
	Line Irom Scriedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit	
	Household goods and furnishings Line from Schedule A/B: 6.1	\$1,500.00	•	\$1,500.00	11 U.S.C. § 522(d)(3)
	Line Irom Scriedule Arb. 6.1			100% of fair market value, up to any applicable statutory limit	
	Television, cell phone and misc.	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule A/B: 11.1	\$200.00	•	\$200.00	11 U.S.C. § 522(d)(3)
	Ellie Holli Geriedale PAB. 11.1			100% of fair market value, up to any applicable statutory limit	
	Checking (9022): Chase Bank (account held jointly with Mark R.	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	Bowyer) Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Part 1: Identify the Property You Claim as Exempt

	rief description of the property and line on chedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	hecking (1967): Chase (account	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	eld jointly with Mark R. Bowyer) ne from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	ederal, State: Right to receive ossible income tax refund (amount	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
is 2	an estimate and is pro-rated for D19) ne from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
		-6	•••		
	re you claiming a homestead exemption of subject to adjustment on 4/01/22 and every 3	· · ·		led on or after the date of adjustme	nt.)
	l No				
	Yes. Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

biblor 2 couse if, illing) First Name Middle Name Last Name Check if this is an amended filing Check if this is an amended filing Tificial Form 106D Chedule D: Creditors Who Have Claims Secured by Property 12/15 as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space eeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case here if known). To any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Test: List All Secured Claims. Last all secured claims. It a creditor has more than one secured claim, list the creditor separately each claim. If more than one reditor has a particular claim, list the other creditors in Part 2. As chas possible, list the claims in alphabetical order according to the creditors in Part 2. As Amount of claim Do not deduct the supports this claim claim plane that supports this claim. Creditor Name Attri: Bankruptcy 400 East Nine Mile Road Ferndale, Mil 48220 Number, State & Zip Code Nature of lien. Check all that apply. Contingent Unsecured claims in alphabetical order according to the creditor's name. 2010 Dodge Journey At least one of the debtor and another Check if this claim relates to a community debt Opened Opened Opened	Debtor 1	Samuel Alexan	der Bowyer			
itted States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Check if this is an amended filing	-	First Name	Middle Name Last Name		-	
isse number	Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
Check if this is an amended filing						
Check if this is an amended filing	United States Bankı	ruptcy Court for the	EASTERN DISTRICT OF MICHIGAN		-	
indicial Form 106D Chedule D: Creditors Who Have Claims Secured by Property 12/15 as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case note of the formation before (if known). In only creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. It is all secured claims. If a creditor has more than one secured claim, list the creditor separately change in the court with your other schedules. You have nothing else to report on this form. Column A Amount of claim Do not deduct the value of collateral that supports this claim Creditor's Name Creditor's Name Creditor's Name Describe the property that secures the claim: \$7,276.00 \$4,500.00 \$2,776.00 \$2,776.00 \$2,776.00 As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check ill this claim relates to a community debt Opened	Case number					
ifficial Form 106D Chedule D: Creditors Who Have Claims Secured by Property 12/15 as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space eded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case nober (if known). It is a creditor shave claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. It is all secured claims. If a creditor has more than one secured claim, list the creditor separately each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As always the claims is a listed claims in alphabetical order according to the creditor's name. Credit Union ONE Describe the property that secures the claim: Credit Union ONE Credit Union ONE Describe the property that secures the claim: 2010 Dodge Journey Attn: Bankruptcy 400 East Nine Mile Road Ferndale, MI 48220 Number, Street, City, State & Zip Code Uniquidated Disputed Nature of lien. Check all that apply. Contingent Value of collateral that supports this claim is: Check all that apply. Contingent Uniquidated Disputed Nature of lien. Check all that apply. Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Opened	(if known)				☐ Check	t if this is an
as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case nother than the top of any additional pages, write your name and case nother than the top of any additional pages, write your name and case nother to the top of any additional pages, write your name and case nother than to this form. On the top the top of any additional pages, write your name and case nother than to this form. On the top the top of any additional pages, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page, write your name and case nother than the page,					amen	ded filing
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seeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case inher (if known). It is all secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. It is all secured claims. If a creditor has more than one secured claim, list the creditor separately each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a Amount of claim by not deduct the value of collateral. Do not deduct the value of collateral. Creditor's Name Describe the property that secures the claim: Creditor's Name Attn: Bankruptcy 400 East Nine Mile Road Ferndale, Mil 48220 Number, Street, City, State & Zip Code Number, Street, City, State & Zip Code Nature of lien. Check all that apply. Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Opened	Schedule D	: Creditors	Who have claims secur	ed by Propert	<u>.y</u>	12/15
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. If Yes. Fill in all of the information below. It Is all secured Claims List all secured Claims List all secured Claims. If a creditor has more than one secured claim, list the creditor separately each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As long the property of the spouse of the property that secures the claims. Credit Union ONE Creditor's Name Describe the property that secures the claim: Creditor's Name Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 1 only Debtor 2 only As agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Opened						
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Tedit Union ONE Credit Union ONE Attn: Bankruptcy 400 East Nine Mile Road Ferndale, MI 48220 Number, Street, City, State & Zip Code Number, Street, City, State & Zip Code Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Dettor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Column A Amount of claim Do not deduct the value of collateral. Amount of claim Do not deduct the value of collateral. \$7,276.00 Value of collateral that supports this claim Do not deduct the value of collateral. \$7,276.00 \$4,500.00 \$2,776.00 \$2,776.00 \$4,500.00 Column B Value of collateral that supports this claim Do not deduct the value of collateral. \$7,276.00 \$4,500.00 \$2,776.00 \$2,776.00 \$4,500.00 \$2,776.00 \$4,500.00 \$2,776.00 \$4,500.00 \$4,500.00 \$4,500.00 \$2,776.00 \$4,500.	☐ No. Check th	is box and submit t	his form to the court with your other schedules	. You have nothing else	to report on this form.	
List All Secured Claims List all secured claims. If a creditor has more than one secured claim, list the creditor separately each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name. Credit Union ONE	_		·	· ·	•	
List all secured claims. If a creditor has more than one secured claim, list the creditor separately each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name. Credit Union ONE			20.011.			
each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name. Credit Union ONE				Column A	Column B	Column C
Credit Union ONE Creditor's Name Attn: Bankruptcy 400 East Nine Mile Road Ferndale, MI 48220 Number, Street, City, State & Zip Code No owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Value of collateral. \$7,276.00 \$4,500.00 \$2,776.00 \$4,500.00 \$2,776.00 \$4,500.00					Value of collateral	Unsecured
Describe the property that secures the claim: \$7,276.00 \$4,500.00 \$2,776.00 Attn: Bankruptcy 400 East Nine Mile Road Ferndale, MI 48220 Number, Street, City, State & Zip Code no owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Describe the property that secures the claim: \$7,276.00 \$4,500.00 \$2,776.00 \$2,776.00 \$4,500.00	much as possible, list t	the claims in alphabet	ical order according to the creditor's name.			
Attn: Bankruptcy 400 East Nine Mile Road Ferndale, MI 48220 Number, Street, City, State & Zip Code No owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	2.1 Credit Union	n ONE	Describe the property that secures the claim:			
As of the date you file, the claim is: Check all that apply. Number, Street, City, State & Zip Code Contingent Unliquidated Disputed	Creditor's Name		2010 Dodge Journey			
As of the date you file, the claim is: Check all that apply. Number, Street, City, State & Zip Code Contingent Unliquidated Disputed						
Ferndale, MI 48220 Number, Street, City, State & Zip Code Unliquidated Disputed			As of the date you file, the claim is: Check all that	_		
Number, Street, City, State & Zip Code Unliquidated Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Opened			apply.			
Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Disputed Nature of lien. Check all that apply. At agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Opened			_			
Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Opened	Number, Offeet, Of	ty, State & Zip Gode	·			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Community debt Community debt Car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	Who owes the debt	? Check one.	•			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Opened Statutory lien (such as tax lien, mechanic's lien) Usual Judgment lien from a lawsuit Other (including a right to offset)	Debtor 1 only		, ,	secured		
At least one of the debtors and another Check if this claim relates to a community debt Opened Opened	Debtor 2 only		car loan)			
Check if this claim relates to a community debt Opened Other (including a right to offset)	☐ Debtor 1 and Debtor	or 2 only	_ ' ` ` ')		
Community debt Opened	At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
·		n relates to a	Other (including a right to offset)			
11/18 Last		•				
Active						
	Date debt was incurre	ed 4/11/19	Last 4 digits of account number 495	0		
11/18 Last Active	☐ Debtor 1 and Debtor ☐ At least one of the ☐ Check if this claim community debt	Opened 11/18 Last Active	☐ Statutory lien (such as tax lien, mechanic's lier ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
40.50	Date debt was incum		Last 4 digits of account number			
4050						
4050	Add the dollar value	e of your entries in C	column A on this page. Write that number here:	\$7,2	76.00	
te debt was incurred 4/11/19 Last 4 digits of account number 4950			the dollar value totals from all pages.			
Add the dollar value of your entries in Column A on this page. Write that number here: \$7,276.00 \$7,276.00 \$7,276.00	Write that number i	nere:		¥-,-		
Add the dollar value of your entries in Column A on this page. Write that number here: \$7,276.00	Part 2: List Other	s to Be Notified fo	or a Debt That You Already Listed			
Add the dollar value of your entries in Column A on this page. Write that number here: f this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$7,276.00 \$7,276.00	Use this page only if trying to collect from than one creditor for	you have others to be you for a debt you cany of the debts tha	oe notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, ar t you listed in Part 1, list the additional creditors	d then list the collection a	gency here. Similarly, if	you have more
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: It 2: List Others to Be Notified for a Debt That You Already Listed The this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is ing to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more an one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any	uebts in Part 1, do no	or fill out or submit th	ns page.			
Last 4 digits of account number 4950 Add the dollar value of your entries in Column A on this page. Write that number here: f this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$7,276.00 \$7,276.00 Int 2: List Others to Be Notified for a Debt That You Already Listed this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is ing to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more			Zip Code On	which line in Part 1 did you e	enter the creditor? 2.1	
Add the dollar value of your entries in Column A on this page. Write that number here: \$7,276.00 \$7,276.00 \$7,276.00 \$7,276.00 \$7,276.00 \$1 this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$7,276.00 \$7,276.00 \$1 List Others to Be Notified for a Debt That You Already Listed Be this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is ing to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more an one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any bits in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code On which line in Part 1 did you enter the creditor? 2.1		_	Las	t 4 digits of account number		
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: Itst Others to Be Notified for a Debt That You Already Listed The this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is ing to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more an one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any bits in Part 1, do not fill out or submit this page.	Ferndale, N		Edd			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

								Ì		
	in this inforn	nation to identify your	case:					1		
Del	otor 1	Samuel Alexande			Last Name					
Del	otor 2	First Name	Middle I	lame	Last Nam	9				
	ouse if, filing)	First Name	Middle 1	Name	Last Nam	Э				
Uni	ted States Bar	nkruptcy Court for the:	EASTERN	DISTRICT OF MIC	CHIGAN					
Cas	se number									
1	nown)								Check if amende	f this is an ed filing
Off	ficial Form	n 106E/F								
Sc	hedule E	/F: Creditors W	ho Have	Unsecured	d Claim	S				12/15
Sche Sche left. nam	edule G: Execu edule D: Credito Attach the Con e and case nun	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sec tinuation Page to this pag nber (if known).	ired Leases (C ured by Prope je. If you have	Official Form 106G). Prty. If more space is no information to re	. Do not inclus needed, co	ide any cre	ditors with partially s you need, fill it out,	secured clai number the	ims that are entries in	e listed in the boxes on the
		ors have priority unsecure								
	No. Go to P		a oranno agan							
	Yes.									
2.	identify what typ possible, list the Part 1. If more t	priority unsecured claims be of claim it is. If a claim ha e claims in alphabetical orde than one creditor holds a pa ation of each type of claim, s	as both priority a er according to articular claim, I	and nonpriority amou the creditor's name. ist the other creditors	unts, list that of If you have me s in Part 3.	claim here a nore than tw	nd show both priority a	and nonpriori	ity amounts	s. As much as
	· · · · · · · · · · · · · · · · · · ·	•				,	Total claim	Priority amount		Nonpriority amount
2.1	Support			ast 4 digits of acco	ount number	1135	\$1,425.00		\$0.00	\$1,425.00
	Office o	editor's Name of Child Support rand Ave Pob 30037 1, MI 48909	7 V	Vhen was the debt i	incurred?		d 05/18 Last 4/24/19	-		
		treet City State Zip Code		s of the date you fi	ile, the claim	is: Check a	all that apply			
	Who incurred	the debt? Check one.	[☐ Contingent						
	Debtor 1 o	nly	[☐ Unliquidated						
	Debtor 2 o	nly		☐ Disputed						
	Debtor 1 a	and Debtor 2 only	T	ype of PRIORITY u	nsecured cla	ıim:				
	☐ At least on	e of the debtors and anothe	er	Domestic support	obligations					
		his claim is for a commur	_	☐ Taxes and certain☐ Claims for death o	•		•			
	■ No	,	_	Other. Specify		, , .				
	☐ Yes		-		amily Su	port				
Par	rt 2: List ΔI	I of Your NONPRIORIT	Y Unsecure	d Claims						
		ors have nonpriority unsec								
٥.	_	ve nothing to report in this p			th your other	schodulos				
	Yes.	re notining to report in this p	art. Gubiilit tills	Tomi to the Court Wil	ar your ourer :	onicuules.				
4.	unsecured clair	nonpriority unsecured clands, list the creditor separately or holds a particular claim, li	y for each claim	n. For each claim liste	ed, identify wl	nat type of o	laim it is. Do not list cl	aims already	included ir	n Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 12

_				
	Ally Financial	Last 4 digits of account number	2438	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438	When was the debt incurred?	Opened 07/18 Last Active 11/25/18	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Lease	g plane, and other eliminal desic	
		- Other. Specify		
	AmeriCredit/GM Financial Nonpriority Creditor's Name	Last 4 digits of account number	2743	\$0.00
	Attn: Bankruptcy Po Box 183853	When was the debt incurred?	Opened 11/16 Last Active 12/21/18	
	Arlington, TX 76096 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.		ist shook an that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Lease		
1	Beaumont	Last 4 digits of account number		\$1,816.00
_	Nonpriority Creditor's Name	- When we the debt incomed?		
	Business Center 750 Stephenson Hwy	When was the debt incurred?		
	Troy, MI 48007			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	a ciaim:	
	☐ Check if this claim is for a community debt	_	protion agreement or diverse that did ==4	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Medical

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debto	Samuel Alexander Bowyer		Case number (if known)		
4.4	Capital One	Last 4 digits of account number	4286	\$274.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/18 Last Active 5/06/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No □ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Revolving	credit purchases		
4.5	Chase Card Services	Last 4 digits of account number	4472	\$2,222.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/16 Last Active 4/30/19		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other. Specify Revolving	credit purchases		
4.6	Chase Card Services	Last 4 digits of account number	1387	\$2,133.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?	Opened 07/15 Last Active 4/28/19		
	Wilmington, DE 19850		.,20,10		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	_ '			
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. C.		
	At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			

■ No ☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Revolving credit purchases

Debtor	1 Samuel Alexander Bowyer	Case number (if known)					
4.7	Chase Card Services	Last 4 digits of account number	9787	\$1,998.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 07/17 Last Active 4/28/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Revolving of	credit purchases				
4.8	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	7001	\$1,214.00			
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 02/18 Last Active 4/04/19				
	Number Street City State Zip Code Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated] Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Revolving of	credit purchases				
4.9	Chex Systems	Last 4 digits of account number		\$0.00			
	7805 Hudson Ste. 100 Saint Paul, MN 55125	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans					
	\square Check if this claim is for a community debt	ration agreement or divorce that you did not					
	Is the claim subject to offset?						
	■ No	g plans, and other similar debts					
	☐ Yes ☐ Other. Specify Notice						

Schedule E/F: Creditors Who Have Unsecured Claims

Comenity Bank/Gardner White Furniture	Last 4 digits of account number	1546	\$1,128.00		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 02/18 Last Active 5/10/19			
Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.	_				
Debtor 1 only	Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed	l alaim.			
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i claim:			
☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
□ Yes	■ Other. Specify Revolving (-			
Dall Financial Saminas I I C		2245	¢004.00		
Dell Financial Services LLC Nonpriority Creditor's Name	Last 4 digits of account number	3215	\$881.00		
Attn: President/CEO Po Box 81577	When was the debt incurred?	Opened 10/17 Last Active 4/05/19			
Austin, TX 78708 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.	,,,,,	or o			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharing plans, and other similar debts				
□Yes	Other. Specify Revolving of	credit purchases			
Discover Financial	Last 4 digits of account number	9748	\$7,698.00		
Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316	When was the debt incurred?	Opened 05/18 Last Active 4/15/19			
Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
_	Пол				
Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed				
Debtor 2 only					
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
At least one of the debtors and another	Student loans				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
□ Yes	■ Other Specify Revolving	and dit munch as as			

Schedule E/F: Creditors Who Have Unsecured Claims

ebto	Samuel Alexander Bowyer		Case number (if known)		
1	Genesis FS Card Services/Kay Jewelers	Last 4 digits of account number	4649	\$3,548.00	
	Nonpriority Creditor's Name Attn: Bankruptcy 375 Ghent Rd	When was the debt incurred?			
	Akron, OH 44333 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Revolving	•		
1	Kohls/Capital One	Last 4 digits of account number	1982	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 02/15 Last Active 11/10/16	, , , , , , , , , , , , , , , , , , , 	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc			
_	_ 166	- Other. Specify			
	Medstar Ambulance Nonpriority Creditor's Name 6324 Taylor Dr.	Last 4 digits of account number When was the debt incurred?		Unknowr	
	Flint, MI 48507-4680 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim.		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Student loans	aration agreement or divorce that you did not		
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	·		
	☐ Yes	Other. Specify Medical ser	rvices		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 12

1 Samuel Alexander Bowyer	Case number (if known)			
Merchant & Medical Credit Corp	Last 4 digits of account number	\$1,323.0		
Nonpriority Creditor's Name 6324 Taylor Dr. Flint, MI 48507	When was the debt incurred?			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Collecting for Henry Ford			
Merchant & Medical Credit Corp	Last 4 digits of account number	Unkno		
Nonpriority Creditor's Name 6324 Taylor Dr. Flint, MI 48507	When was the debt incurred?			
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.				
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	□ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	Debts to pension or profit-sharing plans, and other similar debts			
Yes	■ Other. Specify Collection account (Ambulance Services)			
Merchant & Medical Credit Corp	Last 4 digits of account number	Unknov		
Nonpriority Creditor's Name 6324 Taylor Dr.	When was the debt incurred?			
Flint, MI 48507 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts			
□Yes	Collection account (Sterling Heights Fire Department)			

Debtor 1 Samuel Alexander Bowyer		Case number (if known)					
4.1	MOHELA	Last 4 digits of account number	0002	\$6,703.00			
9	Nonpriority Creditor's Name	Last 4 digits of account number		φυ,7 υ3.υυ			
	Attn: Bankruptcy		Opened 04/16 Last Active				
	633 Spirit Dr	When was the debt incurred?	4/30/19				
	Chesterfield, MO 63005 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.		or chook an that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	,				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□ Yes	Other. Specify					
		Educationa	ıl				
4.2 0	MOHELA	Last 4 digits of account number	0001	\$4,578.00			
<u> </u>	Nonpriority Creditor's Name	_		·			
	Attn: Bankruptcy	WI	Opened 04/16 Last Active				
	633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	4/30/19				
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
		Educationa	ıl				
4.2	MOHELA	land Address of annual country	0003	\$2,799.00			
1	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ2,7 33.00			
	Attn: Bankruptcy		Opened 12/17 Last Active				
	633 Spirit Dr	When was the debt incurred?	4/30/19				
	Chesterfield, MO 63005 Number Street City State Zip Code	As of the date you file, the claim i	is. Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim i	S. Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPPIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	<u> </u>				
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify					

Schedule E/F: Creditors Who Have Unsecured Claims

Educational

Debtor 1 Samuel Alexander Bowyer		Case number (if known)				
4.2	MOHELA	Last 4 digits of account number	0004	\$213.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 12/17 Last Active 4/30/19	•		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify				
		Educationa	l			
4.2 3	Syncb/Toys R Us	Last 4 digits of account number	4155	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 8/16/15 Last Active 2/05/16			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Charge Acc	count			
4.2 4	Third Party Withholding Unit Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00		
	Michigan Dept. of Treasury P.O. Box 30785 Lansing, MI 48909	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts			
	☐ Yes	■ Other. Specify Notice				

Schedule E/F: Creditors Who Have Unsecured Claims

Debt	or 1 Samuel Alexander Bowyer		Case number (if known)	
4.2 5	Univeral Macomb Ambulance Service	Last 4 digits of account nur	nber	Unknown
	Nonpriority Creditor's Name 37583 Mound Rd.	When was the debt incurred	1?	
	Sterling Heights, MI 48310 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the c	claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	ecured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a	a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-	sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medica	al services	
Part	3: List Others to Be Notified About a D	ebt That You Already Listed		
is tı hav	rying to collect from you for a debt you owe to	someone else, list the original cred hat you listed in Parts 1 or 2, list the	that you already listed in Parts 1 or 2. For example itor in Parts 1 or 2, then list the collection agency he e additional creditors here. If you do not have addit	ere. Similarly, if you
Name	e and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
-	Financial	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Renaissance Ctr # B0		■ Part 2: Creditors with Nonpriority Unsecured CI	aims
Detr	oit, MI 48243	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
	eriCredit/GM Financial	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Box 1181145 ngton, TX 76096		Part 2: Creditors with Nonpriority Unsecured Cl	aims
AI III	igion, 1x 70090	Last 4 digits of account number		
	e and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
	ital One	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Box 30281 Lake City, UT 84130		Part 2: Creditors with Nonpriority Unsecured Cl	aims
Jail	Lake City, 01 04130	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
	se Card Services	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Box 15369		■ Part 2: Creditors with Nonpriority Unsecured Cl	aims
VVIII	nington, DE 19850	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?	
	se Card Services	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Box 15369		■ Part 2: Creditors with Nonpriority Unsecured CI	aims
Wiln	nington, DE 19850	Last 4 digits of account number		
Name	e and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
Cha	se Card Services	Line 4.7 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Box 15369		■ Part 2: Creditors with Nonpriority Unsecured CI	aims
Wiln	nington, DE 19850	Last 4 digits of account number	• •	
Name	e and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
	se Card Services	Line <u>4.8</u> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	S
	Box 15369		■ Part 2: Creditors with Nonpriority Unsecured CI	
Wiln	nington, DE 19850	Last 4 digits of account number	. ,	
		=ast i aigito oi account numbel		

Name and Address

Schedule E/F: Creditors Who Have Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

Page 10 of 12

Debtor 1 Samuel Alexander Bowyer		Case number (if known)
Comenity Bank/Gardner White Furniture Po Box 182120 Columbus, OH 43218	Line 4.10 of (<i>Check one</i>): Last 4 digits of account number	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Dell Financial Services LLC 1 Dell Way Round Rock, TX 78682		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
, , , , , , , , , , , , , , , , , , , ,	Last 4 digits of account number	
Name and Address Discover Financial Po Box 15316 Wilmington, DE 19850	On which entry in Part 1 or Part 2 did you Line 4.12 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
William group, DE 10000	Last 4 digits of account number	
Name and Address Kohls/Capital One N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	On which entry in Part 1 or Part 2 did y Line 4.14 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address MOHELA 633 Spirit Dr Chesterfield, MO 63005		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address MOHELA 633 Spirit Dr Chesterfield, MO 63005		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address MOHELA 633 Spirit Dr Chesterfield, MO 63005	On which entry in Part 1 or Part 2 did you Line 4.21 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address MOHELA 633 Spirit Dr Chesterfield, MO 63005		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address State Of Michigan Office Child Support Po Box 30478 Lansing, MI 48909	On which entry in Part 1 or Part 2 did y Line 2.1 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Sterling Jewelers/Kay Jewelers Po Box 4485 Beaverton, OR 97076		ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Syncb/Toys R Us Po Box 965005 Orlando, FL 32896	On which entry in Part 1 or Part 2 did you Line 4.23 of (Check one): Last 4 digits of account number	ou list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Samuel Alexander Bowyer

Case number (if known)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 1,425.00
otal laims				
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 1,425.00
				Total Claim
otal	6f.	Student loans	6f.	\$ 14,293.00
laims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 24,235.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 38,528.00

Fill in this information to identify your case:					
Debtor 1 Samuel Alexander Bowyer					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	PF MICHIGAN		
Case number					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.,		State		

					Ī
Fill in th	is information to identify your	case:			
Debtor 1	Samuel Alexand	er Bowyer Middle Name	Last Name		
Debtor 2		Wildle Name	Last Name		
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	EASTERN DISTRICT OF MI	CHIGAN		
Case nui	mber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Co d	ebtors			12/15
people ar fill it out, your nam	re filing together, both are equ and number the entries in the ne and case number (if known	ally responsible for supplying boxes on the left. Attach the). Answer every question.	g correct information Additional Page to tl	i. If more space is his page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
1. D	o you have any codebtors? (If	you are filing a joint case, do no	ot list either spouse as	a codebtor.	
Y	es				
	lithin the last 8 years, have yo ona, California, Idaho, Louisiana				
■ N	o. Go to line 3.				
	es. Did your spouse, former spo	use, or legal equivalent live with	you at the time?		
	□ No □ Yes.				
	In which community star	e or territory did you live?		Fill in the name a	and current address of that person.
	City	State	Zip Code		
in lir Forr	ne 2 again as a codebtor only	if that person is a guarantor o	r cosigner. Make sur	e you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
					.,,
3.1	Mark R. Bowyer 22895 Saint George Cir. South Lyon, MI 48178			■ Schedule D, □ Schedule E/F □ Schedule G Credit Union O	-, line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1 Best Case, LLC - www.bestcase.com

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Sill	in this information to	identify your co	200				•				
			ander Bowyer								
	otor 2 ouse, if filing)		<u>.</u>								
Uni	ted States Bankruptc	y Court for the	EASTERN DISTRICT	OF MICHIGAN							
	se number nown)			-			□ A		ed filing ent showin	g postpetition	
0	fficial Form 1	<u> 1061</u>					N	1M / DD/ Y	/YYY		
S	chedule I: Y	our Inco	ome								12/15
spo atta	use. If you are separch a separate sheet tt1: Describe Fill in your employ	rated and you to this form. (Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not inclu	ıde infor	mati	on about	your spour your spour your	ouse. If mo known). A	ore space is	needed,
	information.							☐ Employed			
	If you have more than one job, attach a separate page with information about additional employers.	age with	Employment status	■ Employed □ Not employed				☐ Not employed			
		Occupation	Bottler								
	Include part-time, s self-employed work		Employer's name	Eternal Ink Inc.							
	Occupation may incor homemaker, if it		Employer's address	7987 Lochlin D Brighton, MI 48							
			How long employed t	here? 3.5 mo	nths			_			
Par	t 2: Give Deta	ils About Mon	thly Income								
spoi	use unless you are se	eparated.	ate you file this form. If		·	•	·		·	·	J
	e space, attach a sep		ore than one employer, co this form.	ombine the information	on for all	empi	oyers for	tnat perso	on on the III	nes below. If	you neea
							For Del	otor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	1	,870.66	\$	N/A	
3.	Estimate and list r	monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross In	come. Add lin	ne 2 + line 3.		4.	\$	1,87	70.66	\$	N/A	

				Fo	or Debtor 1			Debtor		
	Copy	y line 4 here	4.	\$	1,870.66	5	\$		N/A	-
_	1:-4	all manuall de directions.		_		_				_
5.		all payroll deductions:	_	•			•			
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	345.33	_	\$_		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	_	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	_	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	_	\$_		N/A	_
	5e.	Insurance	5e.	\$_	0.00	_	\$		N/A	_
	5f.	Domestic support obligations	5f.	\$_	0.00	_	\$_		N/A	_
	5g.	Union dues	5g.	\$_	0.00	_	\$_		N/A	_
	5h.	Other deductions. Specify:	5h.+	+ \$_	0.00) +	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	345.33	3_	\$		N/A	_
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,525.33	3_	\$		N/A	_
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00)	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	_	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$_ \$	0.00	_	\$_ \$		N/A	_
	8d.	Unemployment compensation	8d.	\$	0.00	_	<u> </u>		N/A	_
	8e.	Social Security	8e.	Ψ_ \$	0.00	_	\$ —		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$	0.00	_	\$		N/A	_
	8g.	Pension or retirement income	8g.	\$	0.00)	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	+ \$	0.00) +	- \$_		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00)	\$_		N//	4
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		1,525.33 +	\$		N/A	= \$	1,525.33
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,02000	_			ı I	1,020100
11.	State Include other	de all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	deper		-				∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	1,525.33
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?						Combine month!	ned ly income
		Yes. Explain:								

Fill	in this informa	ation to identify yo	our case:								
Debtor 1 Samuel Alexander Bowyer						Check if this is:					
							An amended filing				
	tor 2 ouse, if filing)							wing postpetition chapter the following date:			
(Орс	ouse, ii iiiiig)						10 expenses as or	the following date.			
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	AN		MM / DD / YYYY				
Cas	e number										
(If kı	nown)										
Of	fficial Fo	rm 106J									
			Evnor								
		J: Your		ISES . If two married people are	o filing together he	th are ea	ually rachancible fe	12/15			
info	rmation. If m		eded, atta	ch another sheet to this t							
Par	t 1: Descr	ribe Your House	ehold								
1.	Is this a joir										
	■ No. Go to		in a conor	ate household?							
	□ res. Doe		iii a sepai	ate nousenoid?							
	=		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	btor 2.				
				arr om 1000 2, <i>Expone</i> 00	Tor Coparato Frouco	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.0. 2.				
2.	Do you have	e dependents?	■ No								
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state	the						□ No			
	dependents							□ Yes			
								□ No			
								☐ Yes			
								□ No			
								☐ Yes			
								□ No			
2	Da							☐ Yes			
3.		penses include of people other t	han	No							
		d your depende		Yes							
Par	t 2: Estim	ate Your Ongoi	na Month	v Expenses							
Est exp	imate your ex	xpenses as of ye	our bankr	uptcy filing date unless y y is filed. If this is a supp							
•			_								
				government assistance if cluded it on <i>Schedule I:</i> Y							
	icial Form 10						Your exp	enses			
4.		or home owners and any rent for th		ses for your residence. In	nclude first mortgage	4.	\$	0.00			
		ded in line 4:	e ground c	1 101.			•				
						_	•				
		estate taxes	o or roste	'e incurance		4a.		0.00			
	•	erty, homeowner's e maintenance re		s insurance ipkeep expenses		4b. 4c.		0.00			
		owner's associat					\$	0.00			
5.				our residence, such as ho	me equity loans		\$	0.00			

Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Official Form 106J Schedule J: Your Expenses

19-50543-mlo Doc 1 Filed 07/19/19 Entered 07/19/19 13:30:25 Page 37 of 57

Fill in th	his inform	ation to identify you	case:				
Debtor 1	1	Samuel Alexand	er Bowver				
		First Name	Middle Name	Las	t Name		
Debtor 2 (Spouse if		First Name	Middle Name	Las	t Name		
United S	States Ban	kruptcy Court for the:	EASTERN DISTRICT	OF MICHIGA	N		
Case nu (if known)	umber						☐ Check if this is an amended filing
		106Dec	an Individua	al Dobt	or's Schodu	uloe	
Dec	iaiati	on About	ali illulviuua	ii Debii	JI S Scriedu	1162	12/15
If two m	arried peo	ple are filing togeth	er, both are equally resp	oonsible for s	upplying correct inform	nation.	
obtainin	g money o		in connection with a ba				ent, concealing property, or or imprisonment for up to 20
	Sign	Below					
Die	d you pay	or agree to pay som	eone who is NOT an att	orney to help	you fill out bankruptcy	/ forms?	
-	No						
	Yes. Na	ame of person					ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
		y of perjury, I declare true and correct.	that I have read the su	ımmary and s	chedules filed with this	s declaration	and
х	/s/ Samu	uel Alexander Bow	ver	х			
	Samuel	Alexander Bowye of Debtor 1			Signature of Debtor 2		
	Date Ju	ıly 19, 2019			Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Fill i	n this information to identify yo	nir case.			
Debt	tor 1 Samuel Alexar First Name	Middle Name	Last Name		
Debt (Spou	tor 2 use if, filing) First Name	Middle Name	Last Name		
Unite	ed States Bankruptcy Court for the	e: EASTERN DISTRICT OF	MICHIGAN		
Case (if kno	e number 			_	theck if this is an mended filing
Sta Be as	icial Form 107 Itement of Financia Is complete and accurate as pos mation. If more space is neede ber (if known). Answer every qu	sible. If two married people a d, attach a separate sheet to	are filing together, both are	equally responsible for sup	
Part	1: Give Details About Your I	Marital Status and Where You	Lived Before		
1.	What is your current marital sta	tus?			
	☐ Married■ Not married				
2.	During the last 3 years, have yo	u lived anywhere other than	where you live now?		
	■ No □ Yes. List all of the places you	u lived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	Within the last 8 years, did you s and territories include Arizona, (
	■ No □ Yes. Make sure you fill out S	Schedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Explain the Sources of Yo	our Income			
	Did you have any income from Fill in the total amount of income of the filling a joint case and you	you received from all jobs and a	all businesses, including part	time activities.	ndar years?
	□ No■ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	n January 1 of current year unt date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$6,545.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

- □ No. Go to line 7.
- ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.
- * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.
- Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.
- ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

Official Form 107

Debtor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Deb	otor 1	Samuel Alexander Bowyer		Case number	(if known)	
		-				
14.	I	No		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts more Char	Yes. Fill in the details for each gift or or contributions to charities that e than \$600 city's Name Tess (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses				
	Within or gan	n 1 year before you filed for bankrumbling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	_	Yes. Fill in the details.				
		cribe the property you lost and the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfer	s			
	Includ	No Yes. Fill in the details. on Who Was Paid		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Acce 633 Los	on Who Made the Payment, if Not 'ess Credit Counseling, Inc. W 5th Street, Suite 26001 Angeles, CA 90071 v.accessbk.org	You		2019	\$8.95
	2560 Roya	h Robert Pierce, P.C. 00 Woodward Ave., Ste. 216 al Oak, MI 48067 rneypierce@sbcglobal.net		Attorney Fees		\$625.00
17.	promi Do no		ditors o	d you or anyone else acting on your behalf pay r to make payments to your creditors? ed on line 16.	or transfer any prope	rty to anyone who
		on Who Was Paid		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18.	 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do r include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 							
	Person Who Receive Address	ed Transfer	Description and very property transfer		payme	be any property or ents received or debts exchange	Date made	transfer was e
	Person's relationship	p to you						
19.		re often called asset-pro	otcy, did you transfer an otection devices.)	y property to a	self-settlec	l trust or similar device	of whic	ch you are a
	Name of trust	idiio.	Description and v	alue of the prop	erty transi	ferred	Date	Transfer was
							mad	е
Par	rt 8: List of Certain I	Financial Accounts, In	struments, Safe Deposi	Boxes, and Sto	orage Units	3		
20	Within 1 year before	you filed for hankrunto	y, were any financial ac	counts or instru	ıments hel	d in your name, or for y	our he	nefit closed
20.	sold, moved, or trans Include checking, sav	ferred? vings, money market, o	or other financial account ciations, and other finar	nts; certificates	of deposit			
	■ No							
	Yes. Fill in the de	etails.						
			Last 4 digits of account number Type of account instrument		unt or Date account was closed, sold, moved, or transferred		bef	Last balance fore closing or transfer
21.	Do you now have, or cash, or other valuab		year before you filed for	bankruptcy, an	y safe dep	osit box or other depo	sitory fo	or securities,
	■ No							
	☐ Yes. Fill in the de	etails.						
	Name of Financial In Address (Number, Stree		Who else had acc Address (Number, S State and ZIP Code)		Describe t	he contents		o you still ave it?
22.	Have you stored prop	perty in a storage unit o	or place other than your	home within 1	year before	e you filed for bankrupt	cy?	
	No							
	Yes. Fill in the de	etails.						
	Name of Storage Fac Address (Number, Stree	•	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents		o you still ave it?
Par	rt 9: Identify Propert	ty You Hold or Control	for Someone Fise					
23.		•	meone else owns? Incli	ude any propert	y you borr	owed from, are storing	for, or l	hold in trust
	■ No							
	Yes. Fill in the d	etails.						
	Owner's Name Address (Number, Stree	t, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property		Value
Par	rt 10: Give Details Ab	out Environmental Info	ormation					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? п Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Part 12: Sign Below

Name

Address

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Date Issued

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Debtor 1 Samuel Alexander Bowyer	Case number (if known)
	ng a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Samuel Alexander Bowyer	
Samuel Alexander Bowyer Signature of Debtor 1	Signature of Debtor 2
Date July 19, 2019	Date
Did you attach additional pages to Your State	rement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
□Yes	
Did you pay or agree to pay someone who is	not an attorney to help you fill out bankruptcy forms?
No	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

9	Samue	el Alexander Bowyer	Case No.					
		Debtor(s)	Chapter 7					
		STATEMENT OF ATTORNEY FOR DEBT PURSUANT TO F.R.BANKR.P. 2016(I						
	The und	dersigned, pursuant to F.R.Bankr.P. 2016(b), states that:						
	The und	dersigned is the attorney for the Debtor(s) in this case.						
	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]							
	[X]	FLAT FEE						
	A.	For legal services rendered in contemplation of and in connection with this exclusive of the filing fee paid						
	B.	Prior to filing this statement, received	625.00					
	C.	The unpaid balance due and payable is						
	[]	RETAINER						
	A.	Amount of retainer received	·····					
	B.	The undersigned shall bill against the retainer at an hourly rate of \$ agreed to pay all Court approved fees and expenses exceeding the amount						
	\$0.00	0 of the filing fee has been paid.						
	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]							
	A.	Analysis of the debtor's financial situation, and rendering advice to the debt bankruptcy;	for in determining whether to file a petition in					
	B.	Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;						
	C. —	Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;						
			an Irmuntari mattanai					
	D. ——	 Representation of the debtor in adversary proceedings and other contested by Reaffirmations: 	pankruptcy matters;					
	D. E. F.	Reaffirmations; Redemptions;	oankruptey matters;					
	E.	Reaffirmations; Redemptions; Other:	pankruptey matters;					
	E. F. G.	Reaffirmations; Redemptions; Other: Representation of the debtor at the meeting of creditors;						
	E. F. G.	Reaffirmations; Redemptions; Other:	ing services: s, v proceeding;					
	E. F. G. By agre	Reaffirmations; Redemptions; Other: Representation of the debtor at the meeting of creditors; rement with the debtor(s), the above-disclosed fee does not include the following the sement with the debtors, the above-disclosed fee does not include the following the sement with the debtors, the above-disclosed fee does not include the following temperature of the debtors in any dischargeability actions judicial lien avoidances, relief from stay actions or adversary 2. Defending Motions to Dismiss. 3. Second appearance at adjourned meeting of creditors. 4. 2004 Examinations and/or Depositions; 5. Amendments caused by Debtor's failure to provide accurate arce of payments to the undersigned was from:	ang services: or proceeding; and complete information;					
	E. F. G. By agre	Reaffirmations; Redemptions; Other: Representation of the debtor at the meeting of creditors; mement with the debtor(s), the above-disclosed fee does not include the following the following in the debtors in any dischargeability actions in judicial lien avoidances, relief from stay actions or adversary 2. Defending Motions to Dismiss. 3. Second appearance at adjourned meeting of creditors. 4. 2004 Examinations and/or Depositions; 5. Amendments caused by Debtor's failure to provide accurate	ang services: or proceeding; and complete information;					

7.	The undersigned has not shared or agreed to share, with any corporation, any compensation paid or to be paid except as	other person, other than with members of the undersigned's law firm or follows:
Dated:	July 19, 2019	/s/ Hugh Robert Pierce
		Attorney for the Debtor(s)
		Hugh Robert Pierce P30488
		Hugh Robert Pierce, P.C.
		25600 Woodward Ave., Ste. 216
		Royal Oak, MI 48067
		248-398-5000 attorneypierce@sbcglobal.net
Agreed:	/s/ Samuel Alexander Bowyer	
	Samuel Alexander Bowyer	
	Debtor	Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

Best Case Bankruptcy

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re Samuel Alexander Bowyer		Case No.				
	Debtor(s) Ch					
VER	VERIFICATION OF CREDITOR M					
The above-named Debtor hereby verifies	that the attached list of creditors is true and	correct to the best	of his/her knowledge.			
Date: July 19, 2019	/s/ Samuel Alexander Bowyer	r				

Signature of Debtor

ALLY FINANCIAL ATTN: BANKRUPTCY DEPT PO BOX 380901 BLOOMINGTON, MN 55438

ALLY FINANCIAL 200 RENAISSANCE CTR # B0 DETROIT, MI 48243

AMERICREDIT/GM FINANCIAL ATTN: BANKRUPTCY PO BOX 183853 ARLINGTON, TX 76096

AMERICREDIT/GM FINANCIAL PO BOX 1181145 ARLINGTON, TX 76096

BEAUMONT BUSINESS CENTER 750 STEPHENSON HWY TROY, MI 48007

CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

CAPITAL ONE PO BOX 30281 SALT LAKE CITY, UT 84130

CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON, DE 19850

CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON, DE 19850

CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON, DE 19850 CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON, DE 19850

CHASE CARD SERVICES PO BOX 15369 WILMINGTON, DE 19850

CHASE CARD SERVICES PO BOX 15369 WILMINGTON, DE 19850

CHASE CARD SERVICES PO BOX 15369 WILMINGTON, DE 19850

CHASE CARD SERVICES PO BOX 15369 WILMINGTON, DE 19850

CHEX SYSTEMS
7805 HUDSON STE. 100
SAINT PAUL, MN 55125

COMENITY BANK/GARDNER WHITE FURNITURE ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

COMENITY BANK/GARDNER WHITE FURNITURE PO BOX 182120 COLUMBUS, OH 43218

CREDIT UNION ONE ATTN: BANKRUPTCY 400 EAST NINE MILE ROAD FERNDALE, MI 48220

CREDIT UNION ONE 400 E NINE MILE FERNDALE, MI 48220 DELL FINANCIAL SERVICES LLC ATTN: PRESIDENT/CEO PO BOX 81577 AUSTIN, TX 78708

DELL FINANCIAL SERVICES LLC 1 DELL WAY ROUND ROCK, TX 78682

DISCOVER FINANCIAL ATTN: BANKRUPTCY DEPARTMENT PO BOX 15316 WILMINGTON, DE 19850

DISCOVER FINANCIAL PO BOX 15316 WILMINGTON, DE 19850

GENESIS FS CARD SERVICES/KAY JEWELERS ATTN: BANKRUPTCY 375 GHENT RD AKRON, OH 44333

KOHLS/CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

KOHLS/CAPITAL ONE N56 W 17000 RIDGEWOOD DR MENOMONEE FALLS, WI 53051

MARK R. BOWYER 22895 SAINT GEORGE CIR. SOUTH LYON, MI 48178

MEDSTAR AMBULANCE 6324 TAYLOR DR. FLINT, MI 48507-4680

MERCHANT & MEDICAL CREDIT CORP 6324 TAYLOR DR. FLINT, MI 48507

MERCHANT & MEDICAL CREDIT CORP 6324 TAYLOR DR. FLINT, MI 48507

MERCHANT & MEDICAL CREDIT CORP 6324 TAYLOR DR. FLINT, MI 48507

MOHELA

ATTN: BANKRUPTCY 633 SPIRIT DR CHESTERFIELD, MO 63005

MOHELA

ATTN: BANKRUPTCY 633 SPIRIT DR CHESTERFIELD, MO 63005

MOHELA

ATTN: BANKRUPTCY 633 SPIRIT DR CHESTERFIELD, MO 63005

MOHELA
ATTN: BANKRUPTCY
633 SPIRIT DR

CHESTERFIELD, MO 63005

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MOHELA 633 SPIRIT DR CHESTERFIELD, MO 63005 STATE OF MICHIGAN OFFICE CHILD SUPPORT OFFICE OF CHILD SUPPORT 235 S GRAND AVE POB 30037 LANSING, MI 48909

STATE OF MICHIGAN OFFICE CHILD SUPPORT PO BOX 30478
LANSING, MI 48909

STERLING JEWELERS/KAY JEWELERS PO BOX 4485 BEAVERTON, OR 97076

SYNCB/TOYS R US ATTN: BANKRUPTCY PO BOX 965060 ORLANDO, FL 32896

SYNCB/TOYS R US PO BOX 965005 ORLANDO, FL 32896

THIRD PARTY WITHHOLDING UNIT MICHIGAN DEPT. OF TREASURY P.O. BOX 30785 LANSING, MI 48909

UNIVERAL MACOMB AMBULANCE SERVICE 37583 MOUND RD. STERLING HEIGHTS, MI 48310